PTO/SB/06 (08-03)
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Substitute for Form PTO-875								09 943 806				
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL E	ENTITY	OTHER THAN OR SMALL ENTITY		
	FOR		NUMBER FILED		NUMB	NUMBER EXTRA		RATE	FEE		RATE	FEE
BASIC FEE (37 CFR 1.16(a))							s	OR		5710		
TOTAL CLAIMS (37 CFR 1.16(c))			5	minus 20) = . ~	. —		x s =		OR	x s=	
INDEPENDENT CLAIMS (37 CFR 1.16(b))			minus 3 =		3 =			x s=		OR	x s =	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))							+\$=		OR	+5 =		
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL		OR	TOTAL	710	
CLAIMS AS AMENDED PART II												
	(Column 1) (Column 2) (Column 3)						SMALL E	NTITY	OR	OTHER THAN SMALL ENTITY		
AMENDMÈNT A		REM AF	AIMS IAINING FTER IDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	1	6	Minus	"20	-		X \$=		OR	x s=	
	Independent (37 CFR 1.16(b))	<u> </u>	3	Minus	3	=		x \$=		OR	x s =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							+ \$ =		OR	+s =	
							٠	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	S .
	(Column 1) (Column 2) (Column 3)										-	
AMENDMENT B		REM. AF	AIMS AINING TER IDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	·	RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	14	′	Minus	**	=		x \$=		OR	x \$ =	,
	Independent (37 CFR 1,16(b))	•	3	Minus	***	=	İ	X \$ =		OR	X S =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							+s =		OR	+s =	
						L	TOTAL ADD'L FEE		OR .	TOTAL ADD'L FEE		
			mn 1)		(Column 2)	(Column 3)	,					
AMENDMENT C		REM,	AIMS AINING TER IDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1,16(c))	1:	3	Minus :	**	=		x \$=		OR ·	X S =	9
	Independent (37 CFR 1.16(b))	•	3	Minus	•••	=		x \$=		OR .	x s = ·	
A	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							+\$ =		OR	+ \$ =	
							L	TOTAL ADD'L FEE		OR I	TOTAL ADD'L FEE	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".												

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PATENT APPLICATION EEE DETERMINATION DECORDS

PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875									Application or Docket Number		
CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMALI	SMALL ENTITY		OTHER THAN SMALL ENTITY		
				ER EXTRA	RATE	FEE		RATE	FEE		
BASIC FEE (37 CFR 1.16(a))					S	OR		S			
TOTAL CLAIMS (37 CFR 1.16(c))						x \$ =		-! 			
IND	EPENDENT CLAI	ws -	-7					OR	X \$=	·	
(37 CFR 1.16(b)) minus 3 =					× \$=	-	OR	x \$=			
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))						+ \$=		OR	+ s=		
If the difference in column 1 is less than zero, enter "0" in column 2.						TOTAL		OR	TOTAL		
CLAIMS AS AMENDED - PART II											
		(Column 1)	· ·		(Column 2) (Column 3)		SMALL ENTITY			R THAN ENTITY	
AMENDMENT A		REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total (37 CFR 1.16(c))		Minus	••	=	x \$ =		OR	x \$ =		
	Independent (37 CFR 1.16(b))	. > 3	Wiban	نعز	=	x \$ =		OR	x s =		
¥	FIRST PRESENT	ATION OF MULTIPL	E DEPENDE	ENT CLAIM (37 CF	R 1 16(d))						
				(*****		+s=		OR	+ S =		
						ADD'L FEE	L	ÓR	ADĐ'L FEE		
		(Column 1)		(Column 2)	(Column 3)	r		,	-		
AMENDMENT &		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total (37 CFR 1.16(c))	20	Minus	**	=	x s =		OR	x s =		
	Independent (37 CFR 1.16(b))	• • • • • • • • • • • • • • • • • • •	Minus	***	=	X:\$_ =		OR	x s =		
	FIRST PRESENT	+5 =		OR	+s =						
						TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
		(Column 1)		(Cotumn 2)	(Column 3)						
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total (37 CFR 1.16(c))		Minus		=	x s =		OR ·	X -\$ =		
	Independent (37 CFR 1,16(b))		ME	Ms	=	x \$=		OR :	x s =	o o	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))										
	-			-	TOTAL ADD'L FEE		OR OR	+ § = TOTAL ADD'L FEE			

If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

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